



State Employees' Charitable Campaign

## SPECIAL EVENT

### REPORT ENVELOPE

**FOR CAMPAIGN ADMINISTRATORS**

**USE ONLY**

Pick Up/Drop Off: \_\_\_\_/\_\_\_\_/2019

UWD Representative: \_\_\_\_\_

UWD Andar Number: \_\_\_\_\_

**PLEASE COMPLETE:**

DEPARTMENT: \_\_\_\_\_

DDS CODE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/ZIP \_\_\_\_\_

NAME OF CAPTAIN: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

EMAIL OF CAPTAIN: \_\_\_\_\_

## SPECIAL EVENT MONIES ONLY

(Cash and Checks Only)

Name of Approved Charity	Agency 5-Digit Code	Total Cash	Total Checks	Total Gift
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total in Envelope		\$	\$	\$

**By signing below, I am affirming the validity of this envelope face and content.**

**NOTE: Two (2) signatures (SEALED ENVELOPE) are required.**

Chair: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/2019

Captain: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/2019

**Keep a Copy for Your Records**

### **IMPORTANT REMINDER**

A United Way representative will collect ALL SECC donations.

To schedule a pick-up contact, Bridget Wallace at 302-672-5226 or  
[Bridget.Wallace@delaware.gov](mailto:Bridget.Wallace@delaware.gov).

Before donations can be collected, Chairs must email a copy of this SIGNED form to Bridget Wallace.

### UNITED WAY OF DELAWARE USE ONLY

UWDE Account Manager Signature:			Date:	
	Audited	Deposited	Entered	Verify and Closed
Date				
Initials				